

TRAUMA ADVISORY COMMITTEE MEETING

June 24, 2004

San Diego

M I N U T E S

Attendees: Dr. David Hoyt Dr. William Tuefel Dr. Judith Brill
Larry Karsteadt Leonard Inch Richard Watson
Dr. Jay Goldman Linda Raby Carol (Gunter) Meyers
Bonnie Sinz Donna Nicolaus

Absent: Dr. Ramon Johnson, Dr. Babatunde Jinadu, Dr. Michael Rossini, William Haug,
Bob Eisenman, Barbara Duffy RN, Virginia Hastings

APPROVAL OF MINUTES

The minutes of the last meeting were approved as submitted.

ADDITIONS TO THE AGENDA

- Grant Review
- Whitepaper Update

COMMITTEE GOALS

Dr. Hoyt reiterated that the main goal of the Trauma Advisory Committee is to develop a statewide trauma care system which includes pediatric patient care. The group agreed to work on a regional design.

GRANT REVIEW

The group reviewed a data grant proposal from San Diego. The group indicated that the grant proposal had merit but should include publication of results, a power analysis, and clear definition of outcome measures.

HRSA GRANT

It was agreed that the money from the HRSA Grant would be used to establish two disaster resource centers which will be supplied with necessary equipment. The Committee indicated that hospitals, with adequate capabilities, willing to commit the time and resources necessary should be considered for funding. They also indicated that the following should be considered in the selection process: previous supply caches should be considered when determining appropriate supply, how the facility would care for the caches beyond the funding cycle, whether facilities have a policy in place regarding supplies, strategic location of facility, and ensuring trauma specific equipment and supplies are part of the supply. A letter outlining the requirements will be sent to the LEMSAs for help in the selection process.

CRNA

The committee reviewed the Board of Registered Nursing letter which asked that the trauma regulations be modified to eliminate supervision of CRNAs. After careful review, the group indicated that it is not a scope of practice issue, but minimum staffing requirements considered necessary for an appropriately staffed trauma center that provides a higher level of trauma care.

HR 3999 (EMSC/TRAUMA FUNDING)

HR 3999 is a federal bill that would provide funding for trauma. It would, however, combine the existing funding for EMSC with trauma funding. Although it is unclear as to the direct impact on the EMSC program, the pediatric community is not in support.

TRAUMA REGISTRY DATA SET

The proposed trauma registry data set has been sent to interested parties for comment. The comments will be compiled and reviewed by the Trauma Advisory Committee at the next meeting.

SSV TRAUMA GRANT

Leonard indicated that the SSV grant whitepaper update is being finalized and will be distributed shortly.

STATEWIDE TRAUMA SYSTEM

The Committee decided to concentrate efforts on a vision of the statewide trauma system design. It was agreed that the fundamental system includes prehospital and hospital and that traditional barriers must be bridged to fill in the many gaps in California's system. A regional approach would help to organize and share limited resources to ensure statewide trauma care. The group will develop a detailed regional proposal.

NEXT MEETING

The next Trauma Advisory Committee Meeting will be the retreat which is scheduled for August 30, 2004 in San Diego.